

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

National Association of Insurance and Financial Advisors Political Action Comm

ADDRESS (number and street)

2901 Telestar Ct.

Check if different  
than previously  
reported. (ACC)

Falls Church

VA

22042

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00005249

3. IS THIS  
REPORTNEW  
(N)**OR**AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report(Q1)July 15  
Quarterly Report(Q2)October 15  
Quarterly Report(Q3)January 31  
Quarterly Report(YE)July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the  
State of

5. Covering Period

08

01

2007

through

08

31

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Peter C. Brown

Signature of Treasurer

Electronically Filed by Peter C. Brown

Date

01

23

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

National Association of Insurance and Financial Advisors Political Action Comm

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	8	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	8	3	1	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2007</span>		138478.22
(b) Cash on Hand at Beginning of Reporting Period .....	137125.36	
(c) Total Receipts (from Line 19) .....	89154.37	651717.87
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	226279.73	790196.09
7. Total Disbursements (from Line 31) .....	35472.99	599389.35
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	190806.74	190806.74
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	60793.02	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

National Association of Insurance and Financial Advisors Political Action Comm

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	8	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	8	3	1	2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	31395.41	188416.34
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	57758.96	463301.53
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	89154.37	651717.87
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤	89154.37	651717.87
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	89154.37	651717.87
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	89154.37	651717.87

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	1232.99	110206.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	1232.99	110206.85
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	34000.00	486500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	240.00	2682.50
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	240.00	2682.50
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	35472.99	599389.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	35472.99	599389.35

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	89154.37	651717.87
34. Total Contribution Refunds (from Line 28(d)) .....	240.00	2682.50
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	88914.37	649035.37
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1232.99	110206.85
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1232.99	110206.85

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. James C. Clabuesch

Mailing Address 11375 Fairway Dr

City

Roscommon

State

MI

Zip Code

48653

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Clabuesch Financial Servi-  
ces

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.50

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5434559

Amount of Each Receipt this Period

42.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Gregory Gianakis

Mailing Address 5315 S Conquistador St

City

Las Vegas

State

NV

Zip Code

89148

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wealth Strategies Group

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5434676

Amount of Each Receipt this Period

25.20

**C.**

Full Name (Last, First, Middle Initial)

Mr. Craig L. Quinlan, CLU

Mailing Address 3430 Yorkshire Ct

City

Palatine

State

IL

Zip Code

60067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern Mutual

Occupation

Manging Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5434702

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional) .....

109.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Rebecca J. Flickinger

Mailing Address 1900 W Hart Ave

City

Orange

State

TX

Zip Code

77630

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Flickinger Insurance Agen-  
cy

Occupation  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.50

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5434749

Amount of Each Receipt this Period

17.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Rex W. Oliver

Mailing Address 1173 South 250 West  
Suite 201

City

Saint George

State

UT

Zip Code

84770

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Oliver Insurance and Fina-  
ncial

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5434855

Amount of Each Receipt this Period

42.50

**C.**

Full Name (Last, First, Middle Initial)

Mr Joseph L Morton, III,JD

Mailing Address 5487 N. Bach

City

Meridian

State

ID

Zip Code

83642

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Intermountain Legal Group

Occupation  
Attorney At Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5434886

Amount of Each Receipt this Period

126.00

**SUBTOTAL** of Receipts This Page (optional) .....

185.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Paul Adams

Mailing Address 5101 Missy Maric Lane

City

Las Vegas

State

NV

Zip Code

89130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Clearline Financial Group

Occupation

Field Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5434899

Amount of Each Receipt this Period

72.00

**B.**

Full Name (Last, First, Middle Initial)

Sharon G. Heierman, CAE

Mailing Address 2990 Kemp Rd

City

Havana

State

FL

Zip Code

32333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Florida Association of In-  
surance & Fin

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5434934

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Greg W. Jacobs

Mailing Address 1350 Grand Summitt Drive #116

City

Reno

State

NV

Zip Code

89523

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hendricks Insurance Agency

Occupation

Financial Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.60

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5434964

Amount of Each Receipt this Period

25.20

**SUBTOTAL** of Receipts This Page (optional) .....

139.20

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Matthew Edelstein, CLU,ChFC

Mailing Address 1550 Penstemon Ct

City

Grayslake

State

IL

Zip Code

60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ohio National Financial  
Services

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5434965

Amount of Each Receipt this Period

8.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Matthew B. Stone, LUTCF

Mailing Address 212 Stoney Dr.

City

Durham

State

NC

Zip Code

27703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Southern Farm Bureau Life  
Ins

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5434980

Amount of Each Receipt this Period

24.75

**C.**

Full Name (Last, First, Middle Initial)

Constance Y. Golleher

Mailing Address PO Box 255

City

Mc Lean

State

VA

Zip Code

22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Holleman Companies

Occupation

Director of Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435029

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional) .....

63.25

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Matthew C. Weider, CLU, ChFC

Mailing Address 6855 Compton Heights Circle

City

Clifton

State

VA

Zip Code

20124

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435095

Amount of Each Receipt this Period

50.40

**B.**

Full Name (Last, First, Middle Initial)

Mr. Brian Urie, CFP

Mailing Address 2825 E. Cottonwood Pkwy  
STE 470

City

Salt Lake City

State

UT

Zip Code

84121

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AXA Advisors, LLC

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435116

Amount of Each Receipt this Period

2.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. Brian D. Boesiger, CSA, LUTC

Mailing Address 7021 S. 33rd Street

City

Lincoln

State

NE

Zip Code

68516

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Benefit Management

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435188

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional) .....

82.90

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Charles A. Webb

Mailing Address 2516 Longview Ave.

City

Roanoke

State

VA

Zip Code

24014

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Benefits Group, Inc.

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435207

Amount of Each Receipt this Period

42.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. J Michael Clinton

Mailing Address 3525 Tilford Cir

City

Monroe

State

LA

Zip Code

71201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MetLife Financial Services

Occupation  
Field Service Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435292

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Richard R. Rios, CLU, ChFC

Mailing Address 8720 El Chapul Way

City

Fair Oaks

State

CA

Zip Code

95628

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Brecek & Young Advisors

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435310

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

142.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Brad Tison, CLU, ChFC,

Mailing Address 3216 Southern Woods Drive

City

Des Moines

State

IA

Zip Code

50321

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Achievement Group/Maxx  
Financial

Occupation

Regional Marketing Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435313

Amount of Each Receipt this Period

50.40

**B.**

Full Name (Last, First, Middle Initial)

Mr. B. Keith Potts

Mailing Address P.O. Box 821

City

Wolfforth

State

TX

Zip Code

79382

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Insurance Comp-  
anies

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435336

Amount of Each Receipt this Period

35.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Earl A. Thompson, RFC, LUTCF

Mailing Address 21014 Pricewood Manor Ct.

City

Cypress

State

TX

Zip Code

77433

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Insurance Comp-  
anies

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435353

Amount of Each Receipt this Period

47.00

**SUBTOTAL** of Receipts This Page (optional) .....

132.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Michael W. Struebing, LUTCF, CLU

Mailing Address 16112 Parker Street

City

Omaha

State

NE

Zip Code

68118

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Heritage Financial Services, LLC

Occupation

Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435393

Amount of Each Receipt this Period

42.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Edward F. Randolph

Mailing Address 1515 Mill Bay Road

City

Kodiak

State

AK

Zip Code

99615

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Edward F Randolph Ins. Agency

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435414

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Lester E. Westgard, CLU

Mailing Address 2714 26th Ave SW

City

Fargo

State

ND

Zip Code

58103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Principal Financial Group

Occupation

Special Marketing Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435426

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional) .....

144.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Todd A. Otto

Mailing Address 945 Senior Ave

City

Dickinson

State

ND

Zip Code

58601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Insurance Comp-  
anies

Occupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.60

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435430

Amount of Each Receipt this Period

25.20

**B.**

Full Name (Last, First, Middle Initial)

Mr. Preston R. Speece, LUTCF

Mailing Address 14620 Fowler Ave

City

Omaha

State

NE

Zip Code

68116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Heritage Financial Servic-  
es

Occupation  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435432

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. James A. Shalek, CLU,ChFC

Mailing Address 1706 Candleberry Lane

City

Yorkville

State

IL

Zip Code

60560

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial Group

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.50

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435433

Amount of Each Receipt this Period

42.50

**SUBTOTAL** of Receipts This Page (optional) .....

97.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Brian E. O'Brien, CLU,ChFC,L

Mailing Address 1651 Wolf Run Dr.

City

Richfield

State

WI

Zip Code

53076

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Principal Financial  
Group

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435437

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. John P. Steele, LUTCF

Mailing Address 122 West Main

City

Manhattan

State

MT

Zip Code

59741

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Montana Employee Benefit  
Co.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435553

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Gregory B. Schaeffer

Mailing Address 3627 - 22nd St.

City

Kenosha

State

WI

Zip Code

53144

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Schaeffer Group, LLC

Occupation

AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435593

Amount of Each Receipt this Period

27.00

**SUBTOTAL** of Receipts This Page (optional) .....

117.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Marlin D. Wells, CLU, ChFC,

Mailing Address 2201 N. Washington

City

Roswell

State

NM

Zip Code

88201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AXA Advisors, LLC

Occupation

Financial Professional

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435620

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. August P. Richter, IV, LUTCF,

Mailing Address 401 Wild Oak Drive

City

Manitowoc

State

WI

Zip Code

54220

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern Mutual

Occupation

Special Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435627

Amount of Each Receipt this Period

50.40

**C.**

Full Name (Last, First, Middle Initial)

Mr. Robert W. Tull, CLU, ChFC

Mailing Address 7815 Eagle Rock, N.E.

City

Albuquerque

State

NM

Zip Code

87122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern Mutual Fin  
Network

Occupation

Senior Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435632

Amount of Each Receipt this Period

25.50

**SUBTOTAL** of Receipts This Page (optional) .....

105.90

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Benson B. Terrell, Jr., CFP

Mailing Address 9261 Lanier Rd

City

Lake Charles

State

LA

Zip Code

70605

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Barry Terrell, CFP

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435637

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. John F. Nichols, CLU, DIA

Mailing Address 1331 W Norwood Avenue

City

Chicago

State

IL

Zip Code

60660

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Disability Resource Group,  
Inc.

Occupation

President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435666

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Dennis P. Sunderman, CSA

Mailing Address 2325 Jeans Ct

City

Signal Hill

State

CA

Zip Code

90755

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Eldercare Insurance Servi-  
ces

Occupation

President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435673

Amount of Each Receipt this Period

105.00

**SUBTOTAL** of Receipts This Page (optional) .....

197.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Ms. Shelley M. Rowe, LUTCf

Mailing Address 5908 E. Conservation Dr.

City

Longmont

State

CO

Zip Code

80504

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Generations Financial Res-  
ources

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435746

Amount of Each Receipt this Period

37.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Boyd Lee Williams

Mailing Address 7023 W. Williamette Ave

City

Kennewick

State

WA

Zip Code

99336

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kansas City Life Insurance  
Company

Occupation  
Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435748

Amount of Each Receipt this Period

105.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Sharon S. Walls, CLU,ChFC,L

Mailing Address 1831 Frontier Rd

City

Bennington

State

KS

Zip Code

67422

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kansas Financial Services

Occupation  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435749

Amount of Each Receipt this Period

18.00

**SUBTOTAL** of Receipts This Page (optional) .....

160.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Joseph A. Sztapka

Mailing Address 3705 S. Judy Ave

City

Sioux Falls

State

SD

Zip Code

57103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Modern Woodmen of America

Occupation

Agency Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435763

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. D. David Russell

Mailing Address 8461 Eagle Preserve Way

City

Sarasota

State

FL

Zip Code

34241

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rogers Benefit Group

Occupation

Regional Mgr.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435780

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Cliff F. Wilson, CLU, ChFC,

Mailing Address 1458 W. Bahia Court

City

Gilbert

State

AZ

Zip Code

85233

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Southeast Arizona Ins. Se-  
rvices, LTD /

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1008.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435784

Amount of Each Receipt this Period

126.00

**SUBTOTAL** of Receipts This Page (optional) .....

226.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Terry R. Thayer

Mailing Address 353 Prospector Trail

City

Bozeman

State

MT

Zip Code

59718

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Thayer Agency

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435792

Amount of Each Receipt this Period

25.20

**B.**

Full Name (Last, First, Middle Initial)

Mr. Harry S. Rosnick, LUTCF

Mailing Address 3435 Jefferson Davis Hwy  
P.O. Box 360

City

Fredericksburg

State

VA

Zip Code

22404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nationwide Insurance

Occupation

AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435793

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Robert J. Morales, LUTCF, CLT

Mailing Address 1125 Wyoming Avenue

City

Reno

State

NV

Zip Code

89503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Brecek & Young Advisors,  
Inc.

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435810

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional) .....

110.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Roger L. Owens, LUTCF, RHU

Mailing Address 104 Landing Lane

City

Elkton

State

MD

Zip Code

21921

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rymark Financial Services

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435811

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Daniel J. Wells, LUTCF

Mailing Address 18830 Los Hermanos Ranch Rd

City

Valley Center

State

CA

Zip Code

92082

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Farmers Financial Services

Occupation

Owner/Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

517.50

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435834

Amount of Each Receipt this Period

47.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. Walter M. Schieffer, Jr., LUTCF

Mailing Address 17501 John Wayne

City

Perry

State

OK

Zip Code

73077

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Schieffer & Schieffer, In-  
c.

Occupation

President/Owner

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435837

Amount of Each Receipt this Period

25.20

**SUBTOTAL** of Receipts This Page (optional) .....

114.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Benjamin Bunn Woodard, Jr.

Mailing Address 109 Bristol Court

City

Rocky Mount

State

NC

Zip Code

27803

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AXA Advisors

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435855

Amount of Each Receipt this Period

46.75

**B.**

Full Name (Last, First, Middle Initial)

Mr. Gary M. Owens, LUTCF

Mailing Address PO Box 835

City

Sultan

State

WA

Zip Code

98294

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Country Insurance & Finan-  
cial Services

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435870

Amount of Each Receipt this Period

42.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. A. Duer Pierce, Jr.

Mailing Address 5818 Kennett Pike

City

Wilmington

State

DE

Zip Code

19807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Financial House

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435878

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

114.25

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Michael G. Murphy, LUTCF

Mailing Address 1014 S. 54th St.

City

Omaha

State

NE

Zip Code

68106

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Grace/Mayer Insurance

Occupation  
Associate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435902

Amount of Each Receipt this Period

28.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. James E. Mitchell, LUTCF, CTP

Mailing Address 2209 Ontario

City

Bellingham

State

WA

Zip Code

98229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern Financial Se-  
rvices

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435921

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Robert W. Rensing, LUTCF

Mailing Address 2515 S. 105th Ave

City

Omaha

State

NE

Zip Code

68124

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Robert Rensing Agency, Inc

Occupation  
President/Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435941

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional) .....

130.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. John F. Ridoux

Mailing Address 911 Thorpe Drive

City

Louisville

State

KY

Zip Code

40243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Life Ins. Co./IL

Occupation

Agency Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.60

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435948

Amount of Each Receipt this Period

25.20

**B.**

Full Name (Last, First, Middle Initial)

Mr. Robert A. Styrkiewicz, CLU, LUTCF

Mailing Address 25 Monterey Drive

City

Vernon Hills

State

IL

Zip Code

60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance

Occupation

Exclusive Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5435949

Amount of Each Receipt this Period

56.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. Irv Wiese, CLU, ChFC,

Mailing Address 318 Stamford Bridge Rd

City

Columbia

State

SC

Zip Code

29212

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MW Group

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436008

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional) .....

123.70

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. John Palladino, Jr.

Mailing Address 15060 Becky Lane

City

Monte Sereno

State

CA

Zip Code

95030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Link-Allen Benefit Group

Occupation  
V.P

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436016

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. James John Silbernagel, LUTCF,CFP

Mailing Address W 2329 Capital Drive

City

Campbellsport

State

WI

Zip Code

53010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Silbernagel & Jäsen Finan-  
cial

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436034

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Vito Vitone, CLU

Mailing Address 20 Sheep Farm Dr

City

E Greenwich

State

RI

Zip Code

02818

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
John Hancock

Occupation  
Sr. Fin. Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436037

Amount of Each Receipt this Period

25.20

**SUBTOTAL** of Receipts This Page (optional) .....

127.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Allan B. Schon

Mailing Address 441 16th NW

City

Minot

State

ND

Zip Code

58703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Executive Financial

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436047

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Harry E. Sechman

Mailing Address 13 Beechwood Dr

City

Rutland

State

MA

Zip Code

01543

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
H.E. Sechman Retirement  
Planning

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436058

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Alan R. Zalewski, CLU, ChFC,

Mailing Address 6908 North 27th Street

City

Tacoma

State

WA

Zip Code

98407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Burnley Wilson Associates

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436081

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

110.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Ms. Sharon L. Sparling, CIC

Mailing Address P.O. Box 1914

City

Mount Vernon

State

WA

Zip Code

98273

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

PRODUCER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436086

Amount of Each Receipt this Period

45.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Lane Boozer

Mailing Address 1400 N Corinth St Ste 109

City

Corinth

State

TX

Zip Code

76208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Don Boozer & Assoc.

Occupation

Vice President - Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436101

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. C. Robert Brown, Sr.

Mailing Address 8675 WestCott

City

Germantown

State

TN

Zip Code

38138

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UCL Financial Group

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436143

Amount of Each Receipt this Period

62.50

**SUBTOTAL** of Receipts This Page (optional) .....

157.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. J. Blayne Bird

Mailing Address 315 Willow Drive

City

Blackfoot

State

ID

Zip Code

83221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Archibald Insurance Center

Occupation

Financial Services Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436147

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Cylinda A. Clark

Mailing Address 4002 San Mateo

City

Plano

State

TX

Zip Code

75093

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
A&H Benefits Employee Ben-  
efits, Inc.

Occupation

Sales Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436187

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Darrel V. Hovde

Mailing Address PO Box 1806

City

Minot

State

ND

Zip Code

58702

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Insurance Comp-  
anies

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436196

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional) .....

102.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. William A. Hume, LUTCF

Mailing Address 1075 Woodfield Lane

City

Libertyville

State

IL

Zip Code

60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Insurance Comp-  
anies

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436228

Amount of Each Receipt this Period

42.50

**B.**

Full Name (Last, First, Middle Initial)

Ms. Charmaine Uhrig, LUTCF

Mailing Address RR 1 Box 273A

City

Minatare

State

NE

Zip Code

69356

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436237

Amount of Each Receipt this Period

42.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. Steven M. Stratton, LUTCF,CSA

Mailing Address 17131 Parkview Dr

City

Morgan Hill

State

CA

Zip Code

95037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Capital Planning Partners,  
LLC

Occupation

PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436286

Amount of Each Receipt this Period

105.00

**SUBTOTAL** of Receipts This Page (optional) .....

190.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Kenneth A. Sherlin, III, LUTC

Mailing Address 8 First Street

City

Ashville

State

NC

Zip Code

28803

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Keystone/Benefit Design

Occupation

Marketing Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436296

Amount of Each Receipt this Period

13.75

**B.**

Full Name (Last, First, Middle Initial)

Ms. Carolyn R. Watson, LUTC

Mailing Address 2032 Hollis

City

Abilene

State

TX

Zip Code

79605

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ohio National Financial  
Services

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436298

Amount of Each Receipt this Period

55.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Evelyn Butler, CLTC, LUTC

Mailing Address 10 Lincoln Ave.

City

Vernon

State

NJ

Zip Code

07462

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Certified Financial Servi-  
ces, LLC

Occupation

Field Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.60

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436322

Amount of Each Receipt this Period

25.20

**SUBTOTAL** of Receipts This Page (optional) .....

93.95

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Richard D. Kimmel

Mailing Address 6525 Bellaire Drive S

City

Ft Worth

State

TX

Zip Code

76132

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Southwest Business Center

Occupation

Regional Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436351

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Terry K. Headley, LUTCF, LIC

Mailing Address 20704 Meadow Ridge Dr

City

Springfield

State

NE

Zip Code

68059

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Principal Financial  
Group

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436362

Amount of Each Receipt this Period

208.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Richard B. Jacobs, LUTCF

Mailing Address 5396 Painted Sunrise Dr.

City

Las Vegas

State

NV

Zip Code

89149

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Principal Financial Group

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436367

Amount of Each Receipt this Period

25.20

**SUBTOTAL** of Receipts This Page (optional) .....

275.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Ms. Eleanor B. Blaylock

Mailing Address 9439 Gay Lane

City

Oil City

State

LA

Zip Code

71061

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Burke & Burke Insurance  
Mktg. Inc.

Occupation

Agency Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436394

Amount of Each Receipt this Period

62.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Steven B. Heinz

Mailing Address 1341 E 600 N

City

Orem

State

UT

Zip Code

84097

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
S. B. HEINZ & ASSOCIATES,  
INC.

Occupation

Financial Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436432

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. James R. Goodrich, CLU, ChFC

Mailing Address 1860 Beech

City

Mt. Pleasant

State

MI

Zip Code

48858

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern Mutual

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436438

Amount of Each Receipt this Period

42.50

**SUBTOTAL** of Receipts This Page (optional) .....

155.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Todd G. Grantham

Mailing Address 203 Brandermill Drive

City

Durham

State

NC

Zip Code

27713

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern Mutual Finan-  
cial Network

Occupation

Financial Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436444

Amount of Each Receipt this Period

46.75

**B.**

Full Name (Last, First, Middle Initial)

Mr. James M. Allen

Mailing Address 414 McCall Street

City

Waukesha

State

WI

Zip Code

53186

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern Mutual Life

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436450

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Samuel H. Hazleton, IV

Mailing Address 4220 Lakeshore Drive

City

Diamond Point

State

NY

Zip Code

12824

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern Mutual

Occupation

Financial Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436453

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional) .....

118.75

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. James L. McConathy, Jr.

Mailing Address 706 Trenton St., Apt. 6

City

West Monroe

State

LA

Zip Code

71291

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MetLife Financial Services

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436496

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Jafard D. Burgad, LUTCF

Mailing Address 3842 N. 10th St.

City

Fargo

State

ND

Zip Code

58102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mutual of Omaha Companies

Occupation  
Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436592

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Harlynn N. Bjerke, LUTCF

Mailing Address P. O. Box 144

City

Adams

State

ND

Zip Code

58210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mutual of Omaha Companies

Occupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.80

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436593

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional) .....

110.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Steven Dwayne Gifford

Mailing Address P.O. Box 5027

City

Ashland

State

KY

Zip Code

41105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mutual of Omaha Companies

Occupation

General Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436601

Amount of Each Receipt this Period

25.20

**B.**

Full Name (Last, First, Middle Initial)

Mr. Dennis L. Helgeson, CLU,ChFC,L

Mailing Address 2601 Bel Air Drive

City

Minot

State

ND

Zip Code

58703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
North American Company

Occupation

General Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436618

Amount of Each Receipt this Period

25.20

**C.**

Full Name (Last, First, Middle Initial)

Mr. Albert T. Hurst, Jr.,FICF,C

Mailing Address 1901 S. Broadway St.

City

Little Rock

State

AR

Zip Code

72206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Modern Woodmen of America

Occupation

Agency Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436621

Amount of Each Receipt this Period

25.20

**SUBTOTAL** of Receipts This Page (optional) .....

75.60

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 36 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Daniel L. Lawrence

Mailing Address 5553 Peters Drive

City

West Bend

State

WI

Zip Code

53095

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Modern Woodmen of America

Occupation

Agency Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436627

Amount of Each Receipt this Period

51.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Casey C. Knake, CLU, ChFC

Mailing Address 2902 Mach I Dr.

City

Norfolk

State

NE

Zip Code

68701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Heritage Financial Services, L.L.C.

Occupation

Investment Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436629

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Jerry E. Jensen, LUTCF

Mailing Address 190 So. 800 W.

City

Blackfoot

State

ID

Zip Code

83221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jensco, Inc.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.20

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436632

Amount of Each Receipt this Period

50.40

**SUBTOTAL** of Receipts This Page (optional) .....

143.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Mark A. Chandik, CLU, ChFC

Mailing Address 42 Ritz Cove Drive

City

Dana Point

State

CA

Zip Code

92629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Financial Diligence Partners

Occupation

Agent/Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436634

Amount of Each Receipt this Period

105.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Fred Kazmierski, CLU, LUTCF

Mailing Address 1116 Grand Ave Ste 204

City

Billings

State

MT

Zip Code

59102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MMA Financial Services

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436638

Amount of Each Receipt this Period

27.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Daniel D. Duren, CLU, ChFC, L

Mailing Address 6537 S. 34th Street

City

Lincoln

State

NE

Zip Code

68516

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Benefit Management

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436695

Amount of Each Receipt this Period

42.50

**SUBTOTAL** of Receipts This Page (optional) .....

174.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Ms. Queenie M. Chee, CLU, LUTCF

Mailing Address 833 Waika Place

City

Honolulu

State

HI

Zip Code

96825

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Principal Financial  
Group

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436712

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. John B. Kearns, LUTCF

Mailing Address 1802 First Ave

City

Scottsbluff

State

NE

Zip Code

69361

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jolliffe Capital, Inc.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436793

Amount of Each Receipt this Period

42.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. Richard J. Chandik, MBA

Mailing Address 1332 Shorebird Ln

City

Carlsbad

State

CA

Zip Code

92011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jefferson Pilot Financial

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436820

Amount of Each Receipt this Period

47.50

**SUBTOTAL** of Receipts This Page (optional) .....

132.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Thomas C. Besselman

Mailing Address 6421 Perkins Rd #2B

City

Baton Rouge

State

LA

Zip Code

70808

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Besselman & Little Ag-  
ency

Occupation

President

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436836

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Christopher D. Campbell, CLU, ChFC

Mailing Address 2511 Brandon Road

City

Upper Arlington

State

OH

Zip Code

43221

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Phoenix Companies

Occupation

Executive Benefits Consultant

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

263.50

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436852

Amount of Each Receipt this Period

4.25

**C.**

Full Name (Last, First, Middle Initial)

Mr. David G. Klemisch, LUTCF

Mailing Address 2801 26th Ave SW

City

Fargo

State

ND

Zip Code

58103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Klemisch Agency

Occupation

General Agent

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

408.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436863

Amount of Each Receipt this Period

51.00

**SUBTOTAL** of Receipts This Page (optional) .....

105.25

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Richard L. Hoover, LUTCF, RIA

Mailing Address 2920 S. Jones Blvd., #110

City

Las Vegas

State

NV

Zip Code

89146

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hoover and Associates

Occupation

Agency Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-496.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436869

Amount of Each Receipt this Period

66.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Jill M. Douglass, LUTCF

Mailing Address 2932 Sunstone St.

City

Las Vegas

State

NV

Zip Code

89128

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Country Insurance & Finan-  
cial Services

Occupation

Agency Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436885

Amount of Each Receipt this Period

27.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Robert J. Hollander, LUTCF

Mailing Address 904 Rockhurst Dr.

City

Lincoln

State

NE

Zip Code

68510

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Farm Bureau Insurance Ser-  
vices

Occupation

AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436905

Amount of Each Receipt this Period

105.00

**SUBTOTAL** of Receipts This Page (optional) .....

198.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Dennis L. Miller, LUTCF, CLU

Mailing Address 649 State Road  
P.O. Box 186

City State Zip Code  
Vassar MI 48768

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Farm Bureau Life Ins Co/MI

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5436922

Amount of Each Receipt this Period

42.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Jonathan David Haymes, LUTCF

Mailing Address 1230 s. hickory lane

City State Zip Code  
Nixa MO 65714

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Haymes Insurance Agency

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437005

Amount of Each Receipt this Period

25.20

**C.**

Full Name (Last, First, Middle Initial)

Mr. Robert A. Berg, CLU, LUTCF

Mailing Address 1405 Blackberry Lane

City State Zip Code  
Stevens Point WI 54481

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Planning Concepts Inc.

Occupation  
Sales Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437016

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional) .....

97.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Michael J. Hiller, ChFC

Mailing Address W267 S7930 Stony Pt. Ct.

City

Mukwonago

State

WI

Zip Code

53149

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Central Financial Services

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437017

Amount of Each Receipt this Period

25.20

**B.**

Full Name (Last, First, Middle Initial)

Mr. John Everett, LUTCF

Mailing Address 531 Daniel

City

Santa Maria

State

CA

Zip Code

93454

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Life Ins. Co./IL

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437057

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Rosa K. Dominy

Mailing Address 4015-J Washington Rd

City

Martinez

State

GA

Zip Code

30907

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Life Ins. Co./IL

Occupation

AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437059

Amount of Each Receipt this Period

25.50

**SUBTOTAL** of Receipts This Page (optional) .....

92.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Patricia S. Lucas, CLU,CLTC,L

Mailing Address 8375 Starlight Lane

City

Boones Mill

State

VA

Zip Code

24065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Greystone Financial Group

Occupation

Financial Services Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437063

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Joseph J. Maltese, CFP

Mailing Address 4176 Arikakee Court

City

Jacksonville

State

FL

Zip Code

32223

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Della Porta

Occupation

Investment Advisor Rep.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437087

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Juli Y. McNeely, LUTCF,CFP

Mailing Address S764 Hanson Road

City

Spencer

State

WI

Zip Code

54479

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
McNeely Financial Services  
Inc

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437132

Amount of Each Receipt this Period

51.00

**SUBTOTAL** of Receipts This Page (optional) .....

135.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Frederick L. Granados, LUTCF, FSS

Mailing Address 1145 Davis Avenue

City

Concord

State

CA

Zip Code

94518

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
F L Granados Financial Se-  
rvices

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437163

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Keith M. Gillies, CLU, ChFC,

Mailing Address 109 W. Lakeview Dr.

City

La Place

State

LA

Zip Code

70068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
River Parishes Advisors  
Group, LLC

Occupation  
Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437180

Amount of Each Receipt this Period

62.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. Joe D. Byars, CLU, LUTCF

Mailing Address 5916 Park Ave

City

Fort Smith

State

AR

Zip Code

72903

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Byars Agency, Inc.

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437185

Amount of Each Receipt this Period

25.20

**SUBTOTAL** of Receipts This Page (optional) .....

129.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 45 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Leonard Martin, CSA

Mailing Address 98 Tennyson Rd

City

Warwick

State

RI

Zip Code

02888

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Martin & Associates

Occupation  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437248

Amount of Each Receipt this Period

50.40

**B.**

Full Name (Last, First, Middle Initial)

Mr. Robert T. MacDonald

Mailing Address 1931 N 73rd St.

City

Wauwatosa

State

WI

Zip Code

53213

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Farmers Financial Services

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437256

Amount of Each Receipt this Period

27.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Glenn P. Deal, Jr.

Mailing Address 58 Golf Course Ln.

City

Taylorsville

State

NC

Zip Code

28681

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Thrivent Financial for Lu-  
therans

Occupation  
Financial Associate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.25

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437267

Amount of Each Receipt this Period

46.75

**SUBTOTAL** of Receipts This Page (optional) .....

124.15

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. John G. Brandt, LUTCF, FIC

Mailing Address 2103 Sunset Lane

City

La Crosse

State

WI

Zip Code

54601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437268

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. David M. Koll, LUTCF

Mailing Address 1612 S. 152nd Street

City

Omaha

State

NE

Zip Code

68144

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mutual of Omaha

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437323

Amount of Each Receipt this Period

105.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Mitchell W. Ostrove, CLU, ChFC

Mailing Address 4 New King Street

City

White Plains

State

NY

Zip Code

10604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Ostrove Group Inc.

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437327

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional) .....

177.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 47 / 122

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. R. Jan Pinney, CLU, ChFC,

Mailing Address 5152 Ellington Court

City

Granite Bay

State

CA

Zip Code

95746

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pinney Insurance Center,  
Inc.

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437334

Amount of Each Receipt this Period

208.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Robert L. French, LUTCF

Mailing Address 4105 Sheridan Lake Road

City

Rapid City

State

SD

Zip Code

57702

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Transamerica Life

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437337

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. John J. Bradley, CLU

Mailing Address 148 Grove Street

City

Westwood

State

MA

Zip Code

02090

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bradley Insurance Agency,  
Inc

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.28

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437356

Amount of Each Receipt this Period

41.66

**SUBTOTAL** of Receipts This Page (optional) .....

279.66

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 122

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Daniel L. Rust, LUTCF

Mailing Address 114 W. Arnold

City

Bozeman

State

MT

Zip Code

59715

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Insurance Comp-  
anies

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437371

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. H. Dan Smith, CLU, LUTCF

Mailing Address 1616 Rio Vista

City

Dallas

State

TX

Zip Code

75208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Insurance Comp-  
anies

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1835.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437376

Amount of Each Receipt this Period

215.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Russell A. Smith

Mailing Address 22928 San Joaquin Drive East

City

Canyon Lake

State

CA

Zip Code

92587

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Torimax Financial Group,  
Inc.

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437400

Amount of Each Receipt this Period

208.00

**SUBTOTAL** of Receipts This Page (optional) .....

483.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Ms. Cecilia H. Carlton, LUTCF

Mailing Address P. O. Box 636

City

Hazlehurst

State

MS

Zip Code

39083

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Southern Farm Bureau Life  
Insurance

Occupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437403

Amount of Each Receipt this Period

27.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. John C. Johns, LUTCF

Mailing Address 5141 Lilly Rd.

City

Hazlehurst

State

MS

Zip Code

39083

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Southern Farm Bureau Life  
Insurance

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437406

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. David E. Smithkey, CLU, RFC

Mailing Address 9451 Heddy Drive

City

Flushing

State

MI

Zip Code

48433

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Security First Benefits  
Corp.

Occupation  
President/Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437420

Amount of Each Receipt this Period

208.00

**SUBTOTAL** of Receipts This Page (optional) .....

265.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Ms. April L. Howard

Mailing Address 3386 Williamsburg

City

Boise

State

ID

Zip Code

83706

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Howard Insurance Agency

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437423

Amount of Each Receipt this Period

57.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Lawrence Stack, CLU, ChFC,

Mailing Address 28630 Glenbrook Dr

City

Southfield

State

MI

Zip Code

48034

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Michigan Financial

Occupation

Financial Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437445

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Theodore J. Zouzounis, CLU

Mailing Address 820 Mariposa Rd

City

Lafayette

State

CA

Zip Code

94549

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AXIA Employment Benefit  
Insurance Srvc

Occupation

PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437460

Amount of Each Receipt this Period

42.50

**SUBTOTAL** of Receipts This Page (optional) .....

149.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 122

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. William T. Whitmore, Jr., LUTC

Mailing Address P. O. Box 4748

City

Virginia Beach

State

VA

Zip Code

23454

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nationwide Provident

Occupation

Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437461

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Gary H. Pendleton, CLU, ChFC

Mailing Address 2601 Oberlin Rd

City

Raleigh

State

NC

Zip Code

27608

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pendleton Financial Con-  
sulting, Inc.

Occupation

President/Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.64

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437472

Amount of Each Receipt this Period

45.83

**C.**

Full Name (Last, First, Middle Initial)

Mr. Dennis R. Merideth, CLU, ChFC

Mailing Address 6210 N. Camino Pimeria Alta

City

Tucson

State

AZ

Zip Code

85718

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MetLife Financial Services

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437477

Amount of Each Receipt this Period

66.00

**SUBTOTAL** of Receipts This Page (optional) .....

161.83

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Thomas E. Fowler, CLU, LUTCF

Mailing Address 13243 S.E. 51st Place

City

Bellevue

State

WA

Zip Code

98006

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fowler Financial Services,  
Inc.

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

860.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437482

Amount of Each Receipt this Period

107.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. William James DeBruin, LUTCF

Mailing Address 106 Edgewood Ln

City

Combined Locks

State

WI

Zip Code

54113

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
William J. DeBruin Financial Services,

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437484

Amount of Each Receipt this Period

72.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Larry J. Winkelhake, CLU, ChFC

Mailing Address 18600 Longview Ct

City

Brookfield

State

WI

Zip Code

53045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mortensen-Winkelhake

Occupation  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437486

Amount of Each Receipt this Period

90.00

**SUBTOTAL** of Receipts This Page (optional) .....

269.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Ms. Sharon L. Hansen

Mailing Address P.O. Box 1249

1219 S Second Street

City

Mt Vernon

State

WA

Zip Code

98273

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Heritage Financial Group,-  
Inc

Occupation

Financial Professional

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437492

Amount of Each Receipt this Period

27.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Walter J. Scott, CLU

Mailing Address 1022 WASHINGTON AVE.

City

OSHKOSH

State

WI

Zip Code

54901

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
W. F. Coe & Associates,  
LLC

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.20

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437505

Amount of Each Receipt this Period

50.40

**C.**

Full Name (Last, First, Middle Initial)

Mr. Terry M. Kaltenbach, CLU, ChFC

Mailing Address 1358 Ahlrich Ave

City

Encintas

State

CA

Zip Code

92024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Phoenix Life

Occupation

Wealth Management Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437514

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional) .....

202.90

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 122

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Shannon J. Enders

Mailing Address 5677 Westwood Drive

City	State	Zip Code
Muskegon	MI	49441

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lakeshore Employee Benefi-  
tsOccupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	0	7

Transaction ID: 5437530

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. David B. Bianchi, CLU

Mailing Address 1125 Beldon Way

City	State	Zip Code
Reno	NV	89503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern MutualOccupation  
Financial Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	0	7

Transaction ID: 5437533

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. James A. Buchan, CLU, ChFC

Mailing Address 5716 W. Orlando Circle

City	State	Zip Code
Broken Arrow	OK	74011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern MutualOccupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	0	7

Transaction ID: 5437547

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional) .....

162.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Richard A. Koob, CLU, ChFC,

Mailing Address 301 Frederick Street

City

Waukesha

State

WI

Zip Code

53186

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern Mutual

Occupation

Financial Representative

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437558

Amount of Each Receipt this Period

50.40

**B.**

Full Name (Last, First, Middle Initial)

Mr. Robert M. Roach, CLU, ChFC

Mailing Address 1287 Harrison Pond Drive

City

New Albany

State

OH

Zip Code

43054

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Executive Planning Systems

Occupation

General Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1193.30

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437563

Amount of Each Receipt this Period

117.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. Charles D. Zaleski, CLU, ChFC

Mailing Address 28400 Ridgethorpe Ct

City

Rancho Palos Verde

State

CA

Zip Code

90275

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Zaleski Ins Svcs Inc

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437567

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional) .....

209.90

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. David William Ashley

Mailing Address 10939 N W 32 PI

City

Gainesville

State

FL

Zip Code

32606

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern Mutual Finan-  
cial

Occupation

Financial Services Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437568

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Anthony D. Miller, CLU, ChFC,

Mailing Address 4502 Hi-Line Dr

City

Billings

State

MT

Zip Code

59106

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Anthony D. Miller Financi-  
al Group

Occupation

Financial Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437586

Amount of Each Receipt this Period

50.40

**C.**

Full Name (Last, First, Middle Initial)

Mr. John W. Collier, LUTCF

Mailing Address 4600 Kietzke Lane, #134-D

City

Reno

State

NV

Zip Code

89502

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American General Financial  
Group

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437595

Amount of Each Receipt this Period

25.20

**SUBTOTAL** of Receipts This Page (optional) .....

117.60

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Ken Simons, CLU, ChFC,

Mailing Address 808 Thoroughbred Lane

City

Artesia

State

NM

Zip Code

88210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New York Life Insurance

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.80

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437600

Amount of Each Receipt this Period

50.10

**B.**

Full Name (Last, First, Middle Initial)

Mr. Aldous Kawaiiani Paalani

Mailing Address 2219 Kaululaau Street

City

Honolulu

State

HI

Zip Code

96813

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Equity Insurance Services,  
Inc

Occupation

Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437603

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Gordon T. Colburn

Mailing Address 126 Crystal Springs Road

City

San Dimas

State

CA

Zip Code

91773

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Colburn Ins. Services, In-  
c.

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437611

Amount of Each Receipt this Period

42.50

**SUBTOTAL** of Receipts This Page (optional) .....

142.60

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Dennis A. Brumbaugh, LUTCF

Mailing Address 17 Conley Lane

City

Elma

State

WA

Zip Code

98541

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Brumbaugh Insurance Servi-  
ces

Occupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437625

Amount of Each Receipt this Period

42.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Thomas F. Flournoy, Jr., CLU

Mailing Address 5300 Zebulon Rd

City

Macon

State

GA

Zip Code

31210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New York Life

Occupation  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437669

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. M. Jay Einstein, CLU

Mailing Address 59 Margarete Dr.

City

Pittsgrove

State

NJ

Zip Code

08318

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New York Life

Occupation  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437680

Amount of Each Receipt this Period

72.00

**SUBTOTAL** of Receipts This Page (optional) .....

156.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Arthur Ivan Swanson, LUTCF

Mailing Address 2270 E. 24TH PL

City

Yuma

State

AZ

Zip Code

85365

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New York Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437681

Amount of Each Receipt this Period

25.20

**B.**

Full Name (Last, First, Middle Initial)

Mr. Troy J. Shreve, CLU

Mailing Address 7100 S 45th Street

City

Lincoln

State

NE

Zip Code

68516

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Benefit Management

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437698

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Douglas E. Aycock, CLU, ChFC

Mailing Address 5113 Southwest Pkwy # 200

City

Austin

State

TX

Zip Code

78735

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Aycock Financial Group

Occupation

Employee Benefit Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437701

Amount of Each Receipt this Period

42.50

**SUBTOTAL** of Receipts This Page (optional) .....

109.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. H. Larry Fortenberry, CPA, CLU, Ch

Mailing Address 123 Northshore Pt

City

Madison

State

MS

Zip Code

39110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Executive Planning Group

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437702

Amount of Each Receipt this Period

52.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. David S. Dickenson, II, CLU, Ch

Mailing Address 7535 Brigham Road

City

Gates Mills

State

OH

Zip Code

44040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dickenson & Associates

Occupation  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437710

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Lawrence J. Fowler, Jr.

Mailing Address 481 Route 82

City

Oakdale

State

CT

Zip Code

06370

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nationwide Insurance

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437722

Amount of Each Receipt this Period

110.00

**SUBTOTAL** of Receipts This Page (optional) .....

204.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. John C. Beckwith

Mailing Address 1908 Greenbriar Drive

City State Zip Code

Portage MI 49024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Ohio National Fin. Serv-  
ices

Occupation  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437727

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Richard D. Vonderlage, CSA, LUTCF

Mailing Address 15202 Sprague St

City State Zip Code

Omaha NE 68116

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Heritage Financial Svcs.

Occupation  
Financial Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437738

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. James O. Geitgey, LUTCF, FIC

Mailing Address 279 Glenmore Dr.

City State Zip Code

Springfield OH 45503

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Geitgey Financial Services

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437762

Amount of Each Receipt this Period

37.50

**SUBTOTAL** of Receipts This Page (optional) .....

121.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Jeffrey P. Case, LUTCF

Mailing Address 1311 33rd Avenue S.W.

City

Minot

State

ND

Zip Code

58701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Case Financial Services  
Inc

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437787

Amount of Each Receipt this Period

27.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. David T. Koppa, CLU, LUTCF

Mailing Address 1105 Via Bolzano

City

Santa Barbara

State

CA

Zip Code

93111

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cornerstone Insurance Ser-  
vices

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437798

Amount of Each Receipt this Period

42.50

**C.**

Full Name (Last, First, Middle Initial)

Ms. Robelynn H. Abadie

Mailing Address 4933 Antioch Blvd.

City

Baton Rouge

State

LA

Zip Code

70817

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Abadie Financial Services

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437799

Amount of Each Receipt this Period

21.00

**SUBTOTAL** of Receipts This Page (optional) .....

90.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Michael J. Ables, LUTCF

Mailing Address PO Box 2205

City

Avila Beach

State

CA

Zip Code

93424

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Michael Ables Insurance  
Services

Occupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437800

Amount of Each Receipt this Period

105.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Darren Scott Mason, CLU, ChFC

Mailing Address 178 Shorecliff Rd

City

Corona Del Mar

State

CA

Zip Code

92625

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Advanced Benefit Systems

Occupation  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.28

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437813

Amount of Each Receipt this Period

41.66

**C.**

Full Name (Last, First, Middle Initial)

Mr. Byron Hyatt Erstad, Jr.

Mailing Address 2510 S Nantucket Way

City

Boise

State

ID

Zip Code

83706

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Erstad & Company

Occupation  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437828

Amount of Each Receipt this Period

50.40

**SUBTOTAL** of Receipts This Page (optional) .....

197.06

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Thomas R. Clark, CLU, ChFC

Mailing Address 1603 22nd St Ste 202

City

West Des Moines

State

IA

Zip Code

50266

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Compensation Designs

Occupation

General Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437832

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Charles W. Potts, CLU, RHU,

Mailing Address 12725 St. Andrews Ter

City

Oklahoma City

State

OK

Zip Code

73120

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MassMutual Financial Group

Occupation

Financial Advisor

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437836

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Ronald W. Erickson, CLU, AEP,

Mailing Address 3002 St. Regis Rd

City

Greensboro

State

NC

Zip Code

27408

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Erickson Financial Compan-  
ies

Occupation

AGENT

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

423.50

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437841

Amount of Each Receipt this Period

46.75

**SUBTOTAL** of Receipts This Page (optional) .....

136.75

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Michael O. Brown, LUTCF

Mailing Address 6512 Nell 3

City

Edmond

State

OK

Zip Code

73013

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MassMutual Financial Group

Occupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437844

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Dale J. Seymour

Mailing Address 2401 Wealdstone Rd.

City

Toledo

State

OH

Zip Code

43617

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MassMutual Financial Group

Occupation  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437851

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Stephen D. Estler, CLU, ChFC

Mailing Address 2177 NE 63 St.

City

Fort Lauderdale

State

FL

Zip Code

33308

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mass Mutual

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437854

Amount of Each Receipt this Period

42.50

**SUBTOTAL** of Receipts This Page (optional) .....

112.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Joseph S. Pantozzi, CLU, ChFC

Mailing Address PO Box 95063

City

Las Vegas

State

NV

Zip Code

89193

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alpha & Omega Financial  
Svcs.

Occupation

Brokerage Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437863

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. David L. Stratton, CLU, ChFC,

Mailing Address 13115 Beach Cir.

City

Anchorage

State

AK

Zip Code

99515

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
StrattonTurner LLC

Occupation

Managing Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

895.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437883

Amount of Each Receipt this Period

105.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. George B. Bryce, CLU, ChFC

Mailing Address 2730 Ardon Ln

City

Casper

State

WY

Zip Code

82609

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Insurance Agency

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437893

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional) .....

207.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Martin Montefel, CLU

Mailing Address 16932 SW 5th Way

City

Weston

State

FL

Zip Code

33326

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Montefel Inc.

Occupation

General Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437898

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Lance B. Kolbet, RHU, LUTCF

Mailing Address 4632 Mountain Park Rd.

City

Pocatello

State

ID

Zip Code

83202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University Financial Group

Occupation

President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1008.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437903

Amount of Each Receipt this Period

126.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Howard Raymond Utz, LUTCF

Mailing Address PO Box 480

City

Mars

State

PA

Zip Code

16046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kansas City Life Insurance  
Company

Occupation

General Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437919

Amount of Each Receipt this Period

42.50

**SUBTOTAL** of Receipts This Page (optional) .....

218.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 68 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Marcus T. Henderson, Sr., LUTCF

Mailing Address 109 Barrington Court East

City

Franklin

State

TN

Zip Code

37067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Henderson Financial Group,  
Inc.

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437922

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Gary A. Bramon, CLU, ChFC

Mailing Address 269 San Felipe Way

City

Novato

State

CA

Zip Code

94945

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alders Financial Solutions

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437924

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Barton C. Pasco, CLU, ChFC,

Mailing Address 309 Running Cedar Lane

City

Richmond

State

VA

Zip Code

23229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pasco Financial Group, LLC

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

417.50

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437928

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

142.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. William V. Irons, CLU, LUTCF

Mailing Address 150 Prospect Rd

City

Wakefield

State

RI

Zip Code

02879

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Irons & Associates

Occupation

President/Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437936

Amount of Each Receipt this Period

25.20

**B.**

Full Name (Last, First, Middle Initial)

Mr. Ronald G. Hester, CLU, ChFC

Mailing Address 261 New River Heights Rd.

City

Boone

State

NC

Zip Code

28607

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jefferson Pilot Financial

Occupation

Division Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437941

Amount of Each Receipt this Period

46.75

**C.**

Full Name (Last, First, Middle Initial)

Mr. Norman A. Coltrane, LUTCF

Mailing Address 1607 Hatherleigh Drive

City

Fayetteville

State

NC

Zip Code

28304

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Callahan & Rice

Occupation

Life Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.75

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437947

Amount of Each Receipt this Period

60.50

**SUBTOTAL** of Receipts This Page (optional) .....

132.45

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Stephen G. Summerlin, CFP

Mailing Address 4014 N. W. 15th Street

City

Gainesville

State

FL

Zip Code

32605

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Summerlin Financial Advis-  
ors, Inc.

Occupation

Certified Financial Planner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437950

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. John A. Davidson, LUTCF, FSS

Mailing Address 1497 Rancho Lane

City

Thousand Oaks

State

CA

Zip Code

91362

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Davidson Insurance & Fina-  
ncial Service

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

890.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437954

Amount of Each Receipt this Period

105.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Lanny D. Levin, CLU, ChFC

Mailing Address 313 Laurel

City

Highland Park

State

IL

Zip Code

60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lanny D. Levin Agency, In-  
c.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437960

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional) .....

189.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Mark V. Snider, ChFC

Mailing Address 44 Elmwood Place

City

Athens

State

OH

Zip Code

45701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Snider, Fuller, Porter &  
Associates

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437961

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Debra L. Franklin-Schatzki

Mailing Address 380 W 12th St

City

New York

State

NY

Zip Code

10014

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
M & K Financial Services,  
LLC

Occupation  
Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437963

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Robert B. Anderson, CLU

Mailing Address 1456 Old Boones Creek Road

City

Jonesborough

State

TN

Zip Code

37659

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tennessee Financial

Occupation  
Division Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437967

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

134.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Vincent M. D'Addona, CLU, ChFC

Mailing Address 141 Greenway Road

City

Lido Beach

State

NY

Zip Code

11561

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
D'Addona Rosenbaum

Occupation

General Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437969

Amount of Each Receipt this Period

85.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Carol A. Anderson, LUTCF, CFP

Mailing Address 717 N. 87th St.

City

Omaha

State

NE

Zip Code

68114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sharp Anderson Arena Curn-  
es & Assoc

Occupation

Representative

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437973

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Thomas M. Hawco, CLU, ChFC

Mailing Address 900 Rockhurst Drive

City

Lincoln

State

NE

Zip Code

68510

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hawco, Anderson & Associa-  
tes

Occupation

Agency Owner

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437975

Amount of Each Receipt this Period

42.50

**SUBTOTAL** of Receipts This Page (optional) .....

177.50

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Jeffrey J. Taggart

Mailing Address 1107 Cedar Ln.  
P.O. Box 2433

City State Zip Code  
Cody WY 82414

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Taggart Company

Occupation  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437983

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Randall C. Wimsatt, LUTCF

Mailing Address 2460 E 20th St

City State Zip Code  
Farmington NM 87401

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
ING Financial Partners

Occupation  
District Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.60

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5437998

Amount of Each Receipt this Period

25.20

**C.**

Full Name (Last, First, Middle Initial)

Mr. Steven M. Daniel, CLU, ChFC,

Mailing Address 2600 Meadowbrook Dr

City State Zip Code  
Butte MT 59701

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Daniel Financial Services,  
Inc.

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.60

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438006

Amount of Each Receipt this Period

25.20

**SUBTOTAL** of Receipts This Page (optional) .....

100.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. H. Keith de Noble, LUTCF, CLU

Mailing Address 13200 W Markham Street, Suite 105

City State Zip Code  
 Little Rock AR 72211

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
H. Keith de Noble Ins. Ag-  
ency, Inc.

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438016

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Nicholas John Stosic

Mailing Address 9820 Dixon Lane

City State Zip Code  
 Reno NV 89511

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Farmers Insurance Group

Occupation  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1008.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438023

Amount of Each Receipt this Period

126.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Shelly D. Pensky, LLC

Mailing Address 2855 S. 4th Avenue #118

City State Zip Code  
 Yuma AZ 85364

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Farmers Insurance Group

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438024

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional) .....

186.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. William J. Lynch, LUTCF

Mailing Address 5075 SW Griffith Dr. #200

City

Beaverton

State

OR

Zip Code

97005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Farmers Insurance

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438030

Amount of Each Receipt this Period

37.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Elwood B. Syverson, LUTCF

Mailing Address 509 Loomis Drive

City

Mauston

State

WI

Zip Code

53948

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Rural Insurance Co's

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438035

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. David D. Cameron, LUTCF

Mailing Address 1142 FAIRVIEW AVE.

City

Rupert

State

ID

Zip Code

83350

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CAMERON & CAMERON

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438044

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional) .....

97.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Lynda D. Turner, LUTCF

Mailing Address 1070 South Bosque Loop

City

Bosque Farms

State

NM

Zip Code

87068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AXA Advisors, LLC

Occupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438050

Amount of Each Receipt this Period

45.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Walter C. Sprye, Jr., CLU, C

Mailing Address 101 Stoney Brook Rd.

City

Rocky Mount

State

NC

Zip Code

27804

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AXA Advisors, LLC

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.60

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438064

Amount of Each Receipt this Period

46.20

**C.**

Full Name (Last, First, Middle Initial)

Mr. Frank H. Briggs, Jr., CLU, C

Mailing Address 2610 Bohler Rd NW

City

Atlanta

State

GA

Zip Code

30327

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Briggs & Associates/AXA  
Advisors, LLC

Occupation  
Financial Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438080

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

141.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Ronald D. Brant, CLU, LUTCF

Mailing Address 10234 Hoffman

City

Maybee

State

MI

Zip Code

48159

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jefferson Pilot Financial

Occupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1714.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438083

Amount of Each Receipt this Period

208.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Roy W. Kern, LUTCF, CLTC

Mailing Address 3775 West Randall Road

City

Springfield

State

MO

Zip Code

65810

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Roy W. Kern & Associate

Occupation  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438085

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Raymond H. Moran, CLU, ChFC

Mailing Address 5463 Irvin Park Cove

City

Memphis

State

TN

Zip Code

38119

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Moran Company

Occupation  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438089

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional) .....

310.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Jeff L. Holland, CLU, ChFC

Mailing Address 200 Matthew Drive

City

Paducah

State

KY

Zip Code

42001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HollandStivers & Assoc.,  
LLC

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438095

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. James W. Oglesby, LUTCF

Mailing Address P. O. Box 1555

City

ENKA

State

NC

Zip Code

28728

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
J.W. Oglesby & Associates

Occupation

Senior Sales Associate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1144.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438099

Amount of Each Receipt this Period

143.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Donna J. Burrill, CLU, ChFC,

Mailing Address P.O.BOX 143

City

FORT COLLINS

State

CO

Zip Code

80522

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Burrill Financial Service

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438101

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional) .....

203.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Paul R. Decker, CLU, ChFC

Mailing Address Box 1832

City

Idaho Falls

State

ID

Zip Code

83403

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Beneficial Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438104

Amount of Each Receipt this Period

50.40

**B.**

Full Name (Last, First, Middle Initial)

Mr. S. Mark Weeks, LUTCF, CLU

Mailing Address 1389 South 500 East

City

Salt Lake City

State

UT

Zip Code

84105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bankers Life & Casualty  
Co.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438106

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Mary C. Castiglione, RHU

Mailing Address 33 Muirfield Ct.

City

Dover

State

DE

Zip Code

19904

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Health Insurance Assoc.

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438107

Amount of Each Receipt this Period

21.00

**SUBTOTAL** of Receipts This Page (optional) .....

96.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Daniel J. Scholz, CLU, ChFC

Mailing Address 1510 So. 183 Circle

City

Omaha

State

NE

Zip Code

68130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ameritas Financial Services

Occupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

670.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438110

Amount of Each Receipt this Period

105.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Henry L Prien, CLU, LUTCF

Mailing Address 415 38th St S Ste E

City

Fargo

State

ND

Zip Code

58103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Family Life Insurance Co.

Occupation  
District Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.40

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438152

Amount of Each Receipt this Period

50.40

**C.**

Full Name (Last, First, Middle Initial)

Mr. Robert C. Buxman, LUTCF

Mailing Address 12690 NW Lorraine Dr.

City

Portland

State

OR

Zip Code

97229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NAIFA-Oregon

Occupation  
Executive Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438170

Amount of Each Receipt this Period

21.00

**SUBTOTAL** of Receipts This Page (optional) .....

176.40

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 81 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Frank R. Nolimal, CLU, ChFC,

Mailing Address 2017 Grafton Ave

City

Henderson

State

NV

Zip Code

89014

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Assurance Ltd

Occupation  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438182

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Alex Hanson, CLU, ChFC,

Mailing Address 7888 Glen Finnan Cir

City

Ft Myers

State

FL

Zip Code

33912

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dawson Companies

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438201

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Thomas R. Laster, RHU

Mailing Address 1713 Elmhurst Ave

City

Nichols Hills

State

OK

Zip Code

73120

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rogers Benefit Group

Occupation  
Regional Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438207

Amount of Each Receipt this Period

50.40

**SUBTOTAL** of Receipts This Page (optional) .....

152.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Hollis O. Inglett, Jr., LUTCF

Mailing Address 31 Cone Rd

City

Ormond Beach

State

FL

Zip Code

32174

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hayward Brown Inc.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438210

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Mark R. Warren, LUTCF

Mailing Address 3603 Grandview

City

Plainview

State

TX

Zip Code

79072

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Warren Insurance Services

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438221

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Johnny Jon Johnson, LUTCF

Mailing Address 3770 N Frandon Avenue

City

Meridian

State

ID

Zip Code

83646

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Regence BlueShield of Ida-  
ho

Occupation

Boise District Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438226

Amount of Each Receipt this Period

27.00

**SUBTOTAL** of Receipts This Page (optional) .....

111.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Jack H. Curtis

Mailing Address 1508 Morning Glory Cr.

City

Tupelo

State

MS

Zip Code

38801

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United American Insurance  
Co.

Occupation

Branch Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438228

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Karl Erik Hansen, CLU, ChFC,

Mailing Address 900 North Shoreline Boulevard

City

Mountain View

State

CA

Zip Code

94043

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Vita Companies

Occupation

Brokerage Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438235

Amount of Each Receipt this Period

42.50

**C.**

Full Name (Last, First, Middle Initial)

Ms. Rae Lee Olson

Mailing Address 218 N El Monte Ave

City

Los Altos

State

CA

Zip Code

94022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Vita Companies

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438243

Amount of Each Receipt this Period

42.50

**SUBTOTAL** of Receipts This Page (optional) .....

135.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 84 / 122

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. David V. Dellinger

Mailing Address 3052 Stanton Circle

City

Carmichael

State

CA

Zip Code

95608

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NAIFA-California

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438247

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. William N. Haraway

Mailing Address 113 Fairview Ave

City

Frederick

State

MD

Zip Code

21701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Haraway Financial Services

Occupation

Financial Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438251

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Kelli J. Carmichael, CLU, LUTCF

Mailing Address 2914 S Coffman

City

Casper

State

WY

Zip Code

82604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lincoln Financial Advisors

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438255

Amount of Each Receipt this Period

22.50

**SUBTOTAL** of Receipts This Page (optional) .....

106.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 85 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Brian R. Phares, LIC, RFC

Mailing Address 1420 Hackberry Road

City

North Platte

State

NE

Zip Code

69101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Phares Financial Services

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438258

Amount of Each Receipt this Period

47.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Richard L. Hill, CLU, ChFC,

Mailing Address 2611 Alvo Road

City

Seward

State

NE

Zip Code

68434

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Unico Financial Services,  
Inc.

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438259

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Shirley A. Nielsen, LUTCF, CLU

Mailing Address 2817 Circle Drive

City

Grand Island

State

NE

Zip Code

68801

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Farm Bureau Financial Ser-  
vices

Occupation

District Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438261

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

139.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Ms. Debbie K. Paul, CLU, ChFC

Mailing Address 4001 MacArthur Blvd Suite 300

City

Newport Beach

State

CA

Zip Code

92660

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Securian Financial Network

Occupation

Insurance Agent

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438266

Amount of Each Receipt this Period

42.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Kenneth E. Knox, CLU, ChFC

Mailing Address Unit 9, 10 East St

City

Providence

State

RI

Zip Code

02906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Penn Mutual

Occupation

Regional Director

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

403.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438273

Amount of Each Receipt this Period

50.40

**C.**

Full Name (Last, First, Middle Initial)

Mr. Joel K. Williamson, CLU, CSA,L

Mailing Address 1750 Cord 16

City

Tulsa

State

TX

Zip Code

79088

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Financial Solutions

Occupation

Insurance Agent

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438286

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional) .....

122.90

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 87 / 122

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. David A. Middaugh, CLU, AEP

Mailing Address 3273 Evergreen Road

City

Fargo

State

ND

Zip Code

58102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Middaugh & Associates, In-  
c.

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1008.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438313

Amount of Each Receipt this Period

126.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Mark B. Schwendeman

Mailing Address 427 4th St

City

Marietta

State

OH

Zip Code

45750

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Schwendeman Agency IN-  
C.

Occupation

PRESIDENT\oWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438316

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. William C. Anderson, LUTCF

Mailing Address 205 Whippoorwill Lane

City

Altamonte Spgs

State

FL

Zip Code

32701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rogers Benefit Group

Occupation

Field Sales Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438318

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

181.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Glenford B. Malcolm, Sr.

Mailing Address P. O. Box 822315

City

South Florida

State

FL

Zip Code

33082

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Monumental Life

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438319

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Laurene B. Prevette, LUTCF, RHU

Mailing Address 741 Romany Road

City

Charlotte

State

NC

Zip Code

28203

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Equity Brokerage, Inc.

Occupation

President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438327

Amount of Each Receipt this Period

27.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. Edward A. Zabielski, Jr.

Mailing Address 104 Clay Ct.

City

Landenberg

State

PA

Zip Code

19350

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Edward A. Zabielski Jr &  
Co.

Occupation

President/Owner

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438335

Amount of Each Receipt this Period

105.00

**SUBTOTAL** of Receipts This Page (optional) .....

174.50

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. James W. Monteverde

Mailing Address WaterWorks Road

City

Sewickley

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Monteverde Group, LLC

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438337

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Kent A. Bennett

Mailing Address 280 Hollow Road

City

Muncy

State

PA

Zip Code

17756

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kent A. Bennett & Assoc.,  
Inc.

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438341

Amount of Each Receipt this Period

87.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. Peter Fulchiron, CLU, LUTCF

Mailing Address 411 San Andreas Drive

City

Novato

State

CA

Zip Code

94945

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Life Ins. Co./IL

Occupation

Agency Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438349

Amount of Each Receipt this Period

208.00

**SUBTOTAL** of Receipts This Page (optional) .....

345.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Matthew S. Tassey

Mailing Address 5 Reggio Ave.

City

Old Orchard Beach

State

ME

Zip Code

04064

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Burwell & Burwell

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438361

Amount of Each Receipt this Period

72.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Ronald D. Balser, CLU

Mailing Address 3650 Paces Ferry Rd N.W.

City

Atlanta

State

GA

Zip Code

30327

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Balser Enterprises LLC

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 2 / 2 0 0 7

Transaction ID: 5438381

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Michael Paul Margolin, CLU

Mailing Address 1902 Hafor Dr

City

Iowa City

State

IA

Zip Code

52246

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 2 / 2 0 0 7

Transaction ID: 5438389

Amount of Each Receipt this Period

120.00

**SUBTOTAL** of Receipts This Page (optional) .....

442.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. James E. Freilingner

Mailing Address 24 Teal Point Dr

City

Scarborough

State

ME

Zip Code

04074

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
James E Freilingner Co

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 2 / 2 0 0 7

Transaction ID: 5438394

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Norman W. Kamerow, CLU, ChFC,

Mailing Address 5225 Pooks Hill Rd  
#301N

City

Bethesda

State

MD

Zip Code

20814

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Capital Financial Gro-  
up

Occupation  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 3 / 2 0 0 7

Transaction ID: 5438409

Amount of Each Receipt this Period

120.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Douglas F. Bennetti, LUTCF

Mailing Address 806 Quail Run

City

Wyoming

State

DE

Zip Code

19934

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nationwide Insurance

Occupation  
Sales Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 6 / 2 0 0 7

Transaction ID: 5438419

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional) .....

395.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Raymond M. White, ChFC, LUTCF

Mailing Address 24 Reverend Houston Drive

City

Bedford

State

NH

Zip Code

03110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cornerstone Benefit & Retirement Group

Occupation

President/Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 6 / 2 0 0 7

Transaction ID: 5438427

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Dale J. Seymour

Mailing Address 2401 Wealdstone Rd.

City

Toledo

State

OH

Zip Code

43617

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MassMutual Financial Group

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 6 / 2 0 0 7

Transaction ID: 5438435

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Eph Baker, CLU, ChFC

Mailing Address 17411 Campbell St

City

Williamsport

State

PA

Zip Code

17701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Baker/Landon Associates

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 6 / 2 0 0 7

Transaction ID: 5438456

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Ms. Roberta Epstein, RHU

Mailing Address 513 Jetty Way

City

Redwood City

State

CA

Zip Code

94065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JHM Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 6 / 2 0 0 7

Transaction ID: 5438480

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Robert E. Dooley, CLU, ChFC,

Mailing Address 1567 Edmond Drive

City

San Carlos

State

CA

Zip Code

94070

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dooley Insurance & Financial Services

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 7 / 2 0 0 7

Transaction ID: 5438494

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Carl James Maus, LUTC

Mailing Address 432 Fort Saratoga

City

Saint Charles

State

MO

Zip Code

63303

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Insurance and Investment Services

Occupation

Career Development Supervisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.20

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438505

Amount of Each Receipt this Period

50.40

**SUBTOTAL** of Receipts This Page (optional) .....

850.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Art E. Kess

Mailing Address 12740 Fieldcreek Ln.

City

Reno

State

NV

Zip Code

89511

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New York Life

Occupation  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 8 / 2 0 0 7

Transaction ID: 5438516

Amount of Each Receipt this Period

120.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Donna Saarem, CLU

Mailing Address 2886 Cedar Ridge Dr

City

Reno

State

NV

Zip Code

89523

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Insurance Co.

Occupation  
Agency Field Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 8 / 2 0 0 7

Transaction ID: 5438522

Amount of Each Receipt this Period

1500.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Kenneth W. Head, CLU, LUTCF

Mailing Address 203 Burning Brush Rd

City

Greenville

State

SC

Zip Code

29607

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Head Financial Group, Inc

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 8 / 2 0 0 7

Transaction ID: 5438523

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

2120.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. R. Philip Sarnecki, CLU

Mailing Address 6598 Heritage Club Drive

City State Zip Code  
Mason OH 45040

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RPS Financial Group

Occupation  
Managing Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 9 / 2 0 0 7

Transaction ID: 5438552

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Robert E. Colford, Jr., LUTC

Mailing Address 3 Castle Rock Drive

City State Zip Code  
Dedham ME 04429

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Colford Insurance Agency

Occupation  
Owner\Operator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438558

Amount of Each Receipt this Period

120.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Christopher Rich

Mailing Address 3 Spruce Tree Lane

City State Zip Code  
Wayland MA 01778

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Clark Consulting

Occupation  
Sr. Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438574

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

520.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Ms. Susan C. Bianco, CLU

Mailing Address 11850 Edgewater Drive #712

City

Lakewood

State

OH

Zip Code

44107

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Benefit Enrollment Servic-  
es, Inc

Occupation

Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438581

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. David William Ashley

Mailing Address 10939 N W 32 Pl

City

Gainesville

State

FL

Zip Code

32606

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern Mutual Finan-  
cial

Occupation

Financial Services Representative

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 4 / 2 0 0 7

Transaction ID: 5438587

Amount of Each Receipt this Period

-42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Vito Vitone, CLU

Mailing Address 20 Sheep Farm Dr

City

E Greenwich

State

RI

Zip Code

02818

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
John Hancock

Occupation

Sr. Fin. Advisor

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

176.40

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 4 / 2 0 0 7

Transaction ID: 5438588

Amount of Each Receipt this Period

-25.20

**SUBTOTAL** of Receipts This Page (optional) .....

182.80

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Todd A. Otto

Mailing Address 945 Senior Ave

City

Dickinson

State

ND

Zip Code

58601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Insurance Comp-  
anies

Occupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

176.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 4 / 2 0 0 7

Transaction ID: 5438589

Amount of Each Receipt this Period

-25.20

**B.**

Full Name (Last, First, Middle Initial)

Mr. Dennis P. Sunderman, CSA

Mailing Address 2325 Jeans Ct

City

Signal Hill

State

CA

Zip Code

90755

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Eldercare Insurance Servi-  
ces

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: 5438595

Amount of Each Receipt this Period

-105.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Craig L. Quinlan, CLU

Mailing Address 3430 Yorkshire Ct

City

Palatine

State

IL

Zip Code

60067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern Mutual

Occupation  
Manging Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: 5438596

Amount of Each Receipt this Period

-42.00

**SUBTOTAL** of Receipts This Page (optional) .....

-172.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Timothy J. Hendricks, CLU

Mailing Address 11897 S. 96th E. PI

City

Bixby

State

OK

Zip Code

74008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Business Planning Group

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 3 / 2 0 0 7

Transaction ID: 5438627

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Dallas H. Neal, LUTCF

Mailing Address 5130 Eastmoor Rd.

City

Salt Lake City

State

UT

Zip Code

84117

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Neal Insurance Benefits,  
LC

Occupation

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 4 / 2 0 0 7

Transaction ID: 5438649

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. William V. Regan, III, CLU

Mailing Address 790 Broomfield Road

City

San Mateo

State

CA

Zip Code

94402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New York Life

Occupation

Retired Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 4 / 2 0 0 7

Transaction ID: 5438650

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1050.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. P. Martin Peters, CLU, RHU

Mailing Address 120 10th St

City

Del Mar

State

CA

Zip Code

92014

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Peters Financial Services,  
Inc

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 4 / 2 0 0 7

Transaction ID: 5438652

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Jeffrey Leonard Allison, ChFC, CLU

Mailing Address 401 Wampanoag Trail, #100

City

Riverside

State

RI

Zip Code

02915

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Oceanstate Financial

Occupation  
Registered Representative-Financial Ad

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: 5438663

Amount of Each Receipt this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Robert Balentine, CLU, ChFC,

Mailing Address P. O. Box 625

City

Benton

State

AR

Zip Code

72018

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Southern Farm Bureau Life  
Insurance

Occupation  
Agency Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

Transaction ID: 5438673

Amount of Each Receipt this Period

120.00

**SUBTOTAL** of Receipts This Page (optional) .....

520.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Randy T. Robertson, LUTC

Mailing Address P.O. Box 93893

City

Lubbock

State

TX

Zip Code

79493

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sanford Insurance Agency

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 6 / 2 0 0 7

Transaction ID: 5438676

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Peter F. Hibbard, CLU, ChFC

Mailing Address 6602 Corina Ct.

City

Columbia

State

MD

Zip Code

21044

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Columbia Benefits Consult-  
ants Inc

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 6 / 2 0 0 7

Transaction ID: 5438685

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Robert D. Lang

Mailing Address 7500 Brooktree Rd. Ste 206

City

Wexford

State

PA

Zip Code

15090

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hager-Lang Settina Inc

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 6 / 2 0 0 7

Transaction ID: 5438688

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1050.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Patrick M. Mucci, Jr.

Mailing Address 1135 Clifton Avenue

City

Clifton

State

NJ

Zip Code

07013

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
M. M. M. Associates

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 7 / 2 0 0 7

Transaction ID: 5438695

Amount of Each Receipt this Period

120.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Anthony J. Domino, Jr.

Mailing Address 83 Long Lots Rd

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Associated Benefit Consul-  
tants, LLC

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 7 / 2 0 0 7

Transaction ID: 5438700

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. George W. Karr, Jr., CLU

Mailing Address 61 Gessner Rd.

City

Kinterville

State

PA

Zip Code

18930

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Karr Barth Associates, In-  
c.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 7 / 2 0 0 7

Transaction ID: 5438701

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

870.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Michael L. Kerley, JD

Mailing Address 2901 Telestar Court

City

Falls Church

State

VA

Zip Code

22042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NAIFA

Occupation

Senior Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

783.75

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 7 / 2 0 0 7

Transaction ID: 5438703

Amount of Each Receipt this Period

52.25

**B.**

Full Name (Last, First, Middle Initial)

Mr. William R. Anderson

Mailing Address 1842 Vermont Ave NW

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NAIFA

Occupation

Sr VP Law & Govt Rel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.45

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 7 / 2 0 0 7

Transaction ID: 5438704

Amount of Each Receipt this Period

20.83

**C.**

Full Name (Last, First, Middle Initial)

Ms. Robin Johnston

Mailing Address 1250 Capital of TX Hwy South  
Bldg. 2, Ste. 125

City

Austin

State

TX

Zip Code

78746

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
National Financial Partne-  
rs

Occupation

Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 4 / 2 0 0 7

Transaction ID: 5438710

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

323.08

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. William D. Stanley

Mailing Address 37159 N Cremona Ave.

City

Lake Villa

State

IL

Zip Code

60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Family Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 4 / 2 0 0 7

Transaction ID: 5438715

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Bryan M. Krupin

Mailing Address 649 26th Street

City

Manhattan Beach

State

CA

Zip Code

90266

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AXA Advisors, LLC

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 4 / 2 0 0 7

Transaction ID: 5438716

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Michael Paul Margolin, CLU

Mailing Address 1902 Hafor Dr

City

Iowa City

State

IA

Zip Code

52246

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-80.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 4 / 2 0 0 7

Transaction ID: 5438718

Amount of Each Receipt this Period

-120.00

**SUBTOTAL** of Receipts This Page (optional) .....

630.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Robert E. Colford, Jr., LUTC

Mailing Address 3 Castle Rock Drive

City

Dedham

State

ME

Zip Code

04429

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Colford Insurance Agency

Occupation

Owner/Operator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 0 / 2 0 0 7

Transaction ID: 5438729

Amount of Each Receipt this Period

120.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Noel Courtney Spencer

Mailing Address 3 Valerie Drive

City

Chester

State

NY

Zip Code

10918

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Spencers Financial Services

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 0 / 2 0 0 7

Transaction ID: 5438751

Amount of Each Receipt this Period

115.08

**C.**

Full Name (Last, First, Middle Initial)

Mr. Mark M. Byron, CLU, ChFC

Mailing Address 1 Kimberwick Court

City

Morristown

State

NJ

Zip Code

07960

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New Jersey Life & Casualty

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 0 / 2 0 0 7

Transaction ID: 5438757

Amount of Each Receipt this Period

240.00

**SUBTOTAL** of Receipts This Page (optional) .....

475.08

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Morland G. McManigal

Mailing Address 5237 Sunridge Dr

City

Fairfield

State

CA

Zip Code

94534

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Ins. Co.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 3 / 2 0 0 7

Transaction ID: 5438765

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Donald A. Eichelberger

Mailing Address 3217 Highway D65

City

Dysart

State

IA

Zip Code

52224

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Eichelberger and Associat-  
es

Occupation

General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.20

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438767

Amount of Each Receipt this Period

50.40

**C.**

Full Name (Last, First, Middle Initial)

Mr. Robert M. Nelson, CLU, LUTCF

Mailing Address 14712 Shirley Street

City

Omaha

State

NE

Zip Code

68144

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Grace-Mayer Ins. Agency

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438768

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. John R. Dean, LUTCF, CLU,

Mailing Address 1700 S.W. 15th Ave.

City

Willmar

State

MN

Zip Code

56201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Affiliated Financial Serv-  
ices Inc.

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438770

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Leslie W. Lee, CLU, ChFC

Mailing Address 7522 E Hampstead Ct.

City

Middleton

State

WI

Zip Code

53562

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Farmer Financial Services

Occupation  
Trainer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438771

Amount of Each Receipt this Period

25.20

**C.**

Full Name (Last, First, Middle Initial)

Mr. T. Leslie Littleton, LUTCF, CLU

Mailing Address 1025 E. Austin

City

Nacogdoches

State

TX

Zip Code

75965

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Ins. Co

Occupation  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438774

Amount of Each Receipt this Period

47.50

**SUBTOTAL** of Receipts This Page (optional) .....

122.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Lawrence E. Lounds

Mailing Address 2477 Valley Oaks Circle

City

Flint

State

MI

Zip Code

48532

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Security 1st Benefits Cor-  
p.

Occupation

President/Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438804

Amount of Each Receipt this Period

105.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. David A. Culley, CLU, ChFC

Mailing Address 4187 Club Drive N.E.

City

Atlanta

State

GA

Zip Code

30319

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nease, Lagana, Eden & Cul-  
ley Inc

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438806

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Angelo T. Stath

Mailing Address 7821 Massachusetts

City

Merrville

State

IN

Zip Code

46410

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Angelo T. Stath Ins. & Fi-  
nc

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 7

Transaction ID: 5438810

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

197.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 108 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. George C. Finklea, Jr., LUTCF

Mailing Address 1707 Waterford Dr

City

Wilson

State

NC

Zip Code

27896

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Insurance Comp-  
anies

Occupation

Multiline Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 3 / 2 0 0 7

Transaction ID: 5438834

Amount of Each Receipt this Period

550.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Bruce C. Hendrickson, CLU, ChFC

Mailing Address 305 11th Ave

City

Holdrege

State

NE

Zip Code

68949

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Principal Financial  
Group

Occupation

AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 3 / 2 0 0 7

Transaction ID: 5438835

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. David F. Lau, JD, CLU, ChF

Mailing Address 5215 Winlane Dr

City

Bloomfield Hills

State

MI

Zip Code

48302

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lau & Lau Associates, LLC

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 4 / 2 0 0 7

Transaction ID: 5438850

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Susan Diane Wier, CFP, ChFC

Mailing Address 8023 South Zikes Rd

City

Bloomington

State

IN

Zip Code

47401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
First American Trust

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 7 / 2 0 0 7

Transaction ID: 5438890

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Donald P. Speakman

Mailing Address Two Penn Center West  
Suite 325

City

Pittsburgh

State

PA

Zip Code

15276

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Speakman Financial Group

Occupation

Financial Planner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 7 / 2 0 0 7

Transaction ID: 5438905

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Kenneth P. Gross, II, CLU, Ch

Mailing Address 8201 Sharonway Ct.

City

Glen Allen

State

VA

Zip Code

23060

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
John Hancock Financial Ne-  
twork

Occupation

Senior Financial Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 7 / 2 0 0 7

Transaction ID: 5438909

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 110 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Michael C. Keenan, CLU, ChFC

Mailing Address 2226 Hartzell Street

City

Evanston

State

IL

Zip Code

60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Prudential Financial

Occupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 7 / 2 0 0 7

Transaction ID: 5438945

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Randy R. Kilgore, CLU, LUTCF

Mailing Address 4004 San Felice Pt.

City

Colorado Springs

State

CO

Zip Code

80906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Securian/Minnesota Life

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 7 / 2 0 0 7

Transaction ID: 5438947

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. John W. Allen, CLU, ChFC

Mailing Address 1310 E Ocean Blvd  
Unit B14

City

Long Beach

State

CA

Zip Code

90802

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Allen Company

Occupation  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 7 / 2 0 0 7

Transaction ID: 5438949

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 111 / 122  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Robert C. Savage, CLU ChFC

Mailing Address 2949 Kenwood Blvd.

City

Toledo

State

OH

Zip Code

43606

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Savage & Associates, Inc.

Occupation

Chairman of the Board

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	0	7

Transaction ID: 5438958

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Paul A. Broome, II

Mailing Address 2552 Benjamin Road

City

Jacksonville

State

FL

Zip Code

32223

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New York Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	0	7

Transaction ID: 5438959

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Michael A. Riffenburg, LUTC

Mailing Address 5111 Borman Drive

City

Spartanburg

State

SC

Zip Code

29301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Riffenburg Insurance Serv-  
ices, LLC

Occupation

Agency Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	0	7

Transaction ID: 5439001

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

1000.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 112 / 122

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Art E. Kess

Mailing Address 12740 Fieldcreek Ln.

City

Reno

State

NV

Zip Code

89511

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New York LifeOccupation  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	0	7

Transaction ID: 5439006

Amount of Each Receipt this Period

120.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. John F. Nichols, CLU, DIA

Mailing Address 1331 W Norwood Avenue

City

Chicago

State

IL

Zip Code

60660

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Disability Resource Group,  
Inc.Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

586.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	0	7

Transaction ID: 5439011

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. William G. Wunder, LUTCF

Mailing Address 21110 Serene Way

City

San Jose

State

CA

Zip Code

95120

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Insurance Comp-  
aniesOccupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	7

Transaction ID: 5439028

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

620.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 113 / 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. W. Harold Petersen, RHU

Mailing Address 24823 Los Altos Drive

City

Valencia

State

CA

Zip Code

91355

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Petersen International Un-  
derwriters

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 0 / 2 0 0 7

Transaction ID: 5439271

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. David G. Zick, CLU, ChFC

Mailing Address 851 Adams Court

City

Bloomfield Hills

State

MI

Zip Code

48304

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Group Associates, Inc.

Occupation  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 1 / 2 0 0 7

Transaction ID: 5439279

Amount of Each Receipt this Period

625.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Ann W. Hartmann, CLU, ChFC,

Mailing Address 7174 Twin Canyon

City

Lambertville

State

MI

Zip Code

48144

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hartmann & Associates

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 2 / 2 0 0 7

Transaction ID: 5439298

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1375.00

**TOTAL** This Period (last page this line number only) .....

31395.41

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 114 / 122

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Wachovia

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Bank Charges

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District: 00

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Transaction ID: 6433333

Date of Disbursement

MM / DD / YYYY  
08 / 29 / 2007

Amount of Each Disbursement this Period

1232.99

Bank Charges

SUBTOTAL of Disbursements This Page (optional) .....

1232.99

TOTAL This Period (last page this line number only) .....

1232.99

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 115 / 122

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b> Full Name (Last, First, Middle Initial) Kirk for Congress Mailing Address P.O. Box 8	<b>Transaction ID:</b> 6449648 <b>Date of Disbursement</b> <div> <div>08</div> <div>01</div> <div>2007</div> </div>
City Winnetka State IL Zip Code 60093 Purpose of Disbursement Contribution: Mark Steven Kirk (IL-10-R-US House) Candidate Name Mark Kirk Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 10	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <b>Category/Type</b> <div>011</div> Contribution: Mark Steven Kirk (IL-10-R-US House)
<b>B.</b> Full Name (Last, First, Middle Initial) Mike Thompson for Congress Mailing Address 5435 Madison Avenue City Sacramento State CA Zip Code 95841 Purpose of Disbursement Contribution: Michael Thompson (CA-1-D-US House) Candidate Name Michael Thompson Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 01	<b>Transaction ID:</b> 6449645 <b>Date of Disbursement</b> <div> <div>08</div> <div>01</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2500.00</div> <b>Category/Type</b> <div>011</div> Contribution: Michael Thompson (CA-1-D-US House)
<b>C.</b> Full Name (Last, First, Middle Initial) Mike Thompson for Congress Mailing Address 5435 Madison Avenue City Sacramento State CA Zip Code 95841 Purpose of Disbursement Contribution: Michael Thompson (CA-1-D-US House) Candidate Name Michael Thompson Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 01	<b>Transaction ID:</b> 6449647 <b>Date of Disbursement</b> <div> <div>08</div> <div>01</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2500.00</div> <b>Category/Type</b> <div>011</div> Contribution: Michael Thompson (CA-1-D-US House)

**SUBTOTAL** of Disbursements This Page (optional) .....

**6000.00**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 116 / 122

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b> Full Name (Last, First, Middle Initial) Dutch Ruppertsberger for Congress	<b>Transaction ID:</b> 6449646 <b>Date of Disbursement</b>
Mailing Address 22 West Padonia Road Suite A307	<input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/>
City Timonium State MD Zip Code 21093	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution: C.A. Dutch Ruppertsberger (MD-2-D-US House)	<input type="text" value="2500.00"/>
Candidate Name Ruppertsberger	<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MD District: 02	Contribution: C.A. Dutch Ruppertsberger (MD-2-D-US House)
<b>B.</b> Full Name (Last, First, Middle Initial) Kind for Congress Committee	<b>Transaction ID:</b> 6449649 <b>Date of Disbursement</b>
Mailing Address 505 King St. Suite 105	<input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/>
City La Crosse State WI Zip Code 54601	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution: Ron Kind (WI-3-D-US House)	<input type="text" value="1000.00"/>
Candidate Name Ron Kind	<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: WI District: 03	Contribution: Ron Kind (W-I-3-D-US House)
<b>C.</b> Full Name (Last, First, Middle Initial) Richardson for Congress	<b>Transaction ID:</b> 6449651 <b>Date of Disbursement</b>
Mailing Address 1212 S Victory Blvd	<input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/>
City Burbank State CA Zip Code 91502	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution: Laura Richardson (CA-37-D-US House-Special)	<input type="text" value="3000.00"/>
Candidate Name Richardson	<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 37	Contribution: Laura Richardson (CA-37-D-US House-Special)

SUBTOTAL of Disbursements This Page (optional) .....

6500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 117 / 122

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b> Full Name (Last, First, Middle Initial) Kagen 4 Congress	<b>Transaction ID:</b> 6449650 <b>Date of Disbursement</b>
Mailing Address 100 West Lawrence St.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 6 / 2 0 0 7</div> </div>
City Appleton State WI Zip Code 54911	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution: Steve Kagen (WI-8-D-US House)	<div>1000.00</div>
Candidate Name Kagen	<div>011</div> <div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Contribution: Steve Kagen (WI-8-D-US House)	
<b>B.</b> Full Name (Last, First, Middle Initial) Debbie Wasserman Schultz for Congress	<b>Transaction ID:</b> 6449652 <b>Date of Disbursement</b>
Mailing Address 4479 Foxglove Lane	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 8 / 2 0 0 7</div> </div>
City Weston State FL Zip Code 33331	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution: Debbie Wasserman-Schultz (FL-20-D-US House)	<div>2500.00</div>
Candidate Name Debbie Wasserman-Schultz	<div>011</div> <div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 20	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Contribution: Debbie Wasserman-Schultz (FL-20-D-US House)	
<b>C.</b> Full Name (Last, First, Middle Initial) Robert Wexler for Congress Committee	<b>Transaction ID:</b> 6449653 <b>Date of Disbursement</b>
Mailing Address 2500 North Military Trail Ste 288	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 8 / 2 0 0 7</div> </div>
City Boca Raton State FL Zip Code 33431	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution: Robert Wexler (FL-19-D-US House)	<div>2500.00</div>
Candidate Name Robert Wexler	<div>011</div> <div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 19	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Contribution: Robert Wexler (FL-19-D-US House)	

**SUBTOTAL** of Disbursements This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 118 / 122

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b> Full Name (Last, First, Middle Initial) Klein for Congress	<b>Transaction ID:</b> 6449654 <b>Date of Disbursement</b>
Mailing Address 21301 Powerline Road, Suite 204	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 8 / 2 0 0 7</div> </div>
City State Zip Code Boca Raton FL 33433	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Contribution: Ronald Klein (FL-22-D-US House)	<div>1500.00</div>
Candidate Name Klein	<div>011</div> <div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 22	Contribution: Ronald Klein (FL-22-D-US House)
<b>B.</b> Full Name (Last, First, Middle Initial) Lee Terry for Congress	<b>Transaction ID:</b> 6449656 <b>Date of Disbursement</b>
Mailing Address P.O. Box 540098	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 8 / 2 0 0 7</div> </div>
City State Zip Code Omaha NE 68154	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Contribution: Lee Terry (NE-2-R-US House)	<div>2500.00</div>
Candidate Name Lee Terry	<div>011</div> <div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NE District: 02	Contribution: Lee Terry (NE-2-R-US House)
<b>C.</b> Full Name (Last, First, Middle Initial) Tim Mahoney for Florida	<b>Transaction ID:</b> 6449655 <b>Date of Disbursement</b>
Mailing Address 1128-408 Royal Palm Beach Blvd.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 8 / 2 0 0 7</div> </div>
City State Zip Code Royal Palm Beach FL 33411	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Contribution: Timothy Mahoney (FL-16-D-US House)	<div>2500.00</div>
Candidate Name Mahoney	<div>011</div> <div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 16	Contribution: Timothy Mahoney (FL-16-D-US House)

**SUBTOTAL** of Disbursements This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Adrian Smith for Congress

Mailing Address 3321 Avenue 1, Suite 6

City State Zip Code  
 Scottsbluff NE 69361

Purpose of Disbursement  
 Contribution: Adrian Smith (NE-3-R-US House)

Candidate Name  
 Smith

011  
 Category/  
 Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NE District: 03

Transaction ID: 6449657

Date of Disbursement

08 / 08 / 2007

Amount of Each Disbursement this Period

2500.00

Contribution: Adrian Smith  
 (NE-3-R-US House)

B.

Full Name (Last, First, Middle Initial)

Gallegly For Congress

Mailing Address Box 940001

City State Zip Code  
 Simi Valley CA 93094

Purpose of Disbursement  
 Contribution: Elton Gallegly (CA-24-R-US House)

Candidate Name  
 Elton Gallegly

011  
 Category/  
 Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 24

Transaction ID: 6449658

Date of Disbursement

08 / 09 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution: Elton Galle-  
 gly (CA-24-R-US House)

C.

Full Name (Last, First, Middle Initial)

Friends of Jim Inhofe

Mailing Address P. O. Box 13300

City State Zip Code  
 Oklahoma City OK 73113

Purpose of Disbursement  
 Contribution: James M. Inhofe (OK-R-US Senate)

Candidate Name  
 James Inhofe

011  
 Category/  
 Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OK District: 01

Transaction ID: 6449659

Date of Disbursement

08 / 13 / 2007

Amount of Each Disbursement this Period

2000.00

Contribution: James M. In-  
 hofe (OK-R-US Senate)

SUBTOTAL of Disbursements This Page (optional) ►

5500.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 120 / 122

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Wyden for Senate <hr/> Mailing Address    123 NE 3rd Suite 321 <hr/> <table> <tr> <td>City Portland</td> <td>State OR</td> <td>Zip Code 97232</td> </tr> </table> <hr/> <table> <tr> <td>Purpose of Disbursement Returned Check #11769 dated 9/8/2006 for Ron Wyden (OR-D).</td> <td><div>011</div> Category/ Type</td> </tr> </table> <hr/> <table> <tr> <td>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> </table> <hr/> State: OR    District: 01	City Portland	State OR	Zip Code 97232	Purpose of Disbursement Returned Check #11769 dated 9/8/2006 for Ron Wyden (OR-D).	<div>011</div> Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 6449660 <b>Date of Disbursement</b> <div>08 / 16 / 2007</div> <hr/> <b>Amount of Each Disbursement this Period</b> <div>-5000.00</div> <hr/> Returned Check #11769 dated 9/8/2006 for Ron Wyden (OR-D).
City Portland	State OR	Zip Code 97232							
Purpose of Disbursement Returned Check #11769 dated 9/8/2006 for Ron Wyden (OR-D).	<div>011</div> Category/ Type								
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼								
<b>B.</b>	Full Name (Last, First, Middle Initial) Moore For Congress <hr/> Mailing Address    P.O. Box 16646 <hr/> <table> <tr> <td>City Milwaukee</td> <td>State WI</td> <td>Zip Code 53216</td> </tr> </table> <hr/> <table> <tr> <td>Purpose of Disbursement Contribution: Gwen Moore (WI-4-D-US House)</td> <td><div>011</div> Category/ Type</td> </tr> </table> <hr/> <table> <tr> <td>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> </table> <hr/> State: WI    District: 04	City Milwaukee	State WI	Zip Code 53216	Purpose of Disbursement Contribution: Gwen Moore (WI-4-D-US House)	<div>011</div> Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 6449661 <b>Date of Disbursement</b> <div>08 / 24 / 2007</div> <hr/> <b>Amount of Each Disbursement this Period</b> <div>4000.00</div> <hr/> Contribution: Gwen Moore (WI-4-D-US House)
City Milwaukee	State WI	Zip Code 53216							
Purpose of Disbursement Contribution: Gwen Moore (WI-4-D-US House)	<div>011</div> Category/ Type								
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼								
<b>C.</b>	Full Name (Last, First, Middle Initial) Gene Green Congressional Campaign <hr/> Mailing Address    PO Box 16128 <hr/> <table> <tr> <td>City Houston</td> <td>State TX</td> <td>Zip Code 77222</td> </tr> </table> <hr/> <table> <tr> <td>Purpose of Disbursement Contribution: Gene Green (TX-29-D-US House)</td> <td><div>011</div> Category/ Type</td> </tr> </table> <hr/> <table> <tr> <td>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> </table> <hr/> State: TX    District: 29	City Houston	State TX	Zip Code 77222	Purpose of Disbursement Contribution: Gene Green (TX-29-D-US House)	<div>011</div> Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 6449662 <b>Date of Disbursement</b> <div>08 / 24 / 2007</div> <hr/> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> <hr/> Contribution: Gene Green (TX-29-D-US House)
City Houston	State TX	Zip Code 77222							
Purpose of Disbursement Contribution: Gene Green (TX-29-D-US House)	<div>011</div> Category/ Type								
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼								

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 121 / 122

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Fallin for Congress

Mailing Address 119 N Robinson, Suite 400

City Oklahoma City State OK Zip Code 73102

Purpose of Disbursement  
Contribution: Mary Fallin (OK-5-R-US House)

Candidate Name  
Fallin

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OK District: 05

Transaction ID: 6449663

Date of Disbursement

08 / 24 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution: Mary Fallin  
(OK-5-R-US House)

**B.**

Full Name (Last, First, Middle Initial)

Ruben Hinojosa for Congress

Mailing Address 502 North 11th Street

City McAllen State TX Zip Code 78501

Purpose of Disbursement  
Contribution: Ruben Hinojosa (TX-15-D-US House)

Candidate Name  
Ruben Hinojosa

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 15

Transaction ID: 6449664

Date of Disbursement

08 / 27 / 2007

Amount of Each Disbursement this Period

2500.00

Contribution: Ruben Hinoj-  
osa (TX-15-D-US House)

**SUBTOTAL** of Disbursements This Page (optional) .....

3500.00

**TOTAL** This Period (last page this line number only) .....

34000.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 122 / 122

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A. Full Name (Last, First, Middle Initial) of Debtor or Creditor**  
 National Association of Insurance and financial Advisors  
 political Action Comm

**Nature of Debt (Purpose):**  
 Payroll, Benefits, Suppli-  
 es, Copies, etc

Mailing Address 2901 Telestar Court

City	State	ZIP Code
Falls Church	VA	22042

Outstanding Balance Beginning This Period

23949.52

Transaction ID: 6460639

Amount Incurred This Period

36843.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

60793.02

1) **SUBTOTALS** This Period This Page (optional)..... ▶

60793.02

2) **TOTALS** This Period (last page this line number only)..... ▶

60793.02

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)..... ▶

60793.02